FORM D

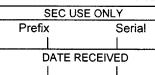
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D
SECTION F(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1260833

OMB Approval							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimates average burden							
Hours per respons	e 16.00						



Name of Offering (check if this in an amendment and name has changed, and indicate char Hotwire, Inc. Series C Preferred Stock and Warrants to purchase Class B Common Stock	nge.)
Filing Under (Check box(es) that apply): Rule 504 Rule 506 Section 4(6) UI	LOE
Type of Filing: New Filing Amendment	AU620203
A. BASIC IDENTIFICATION	
1. Enter the information requested about the issuer	<u> </u>
Name of Issuer (check if this is an amendment and name has changed, and indicate change Hotwire, Inc.	2.)
Address of Executive Offices (Number and Street, City, State, Zip Code) 333 Market Street, Suite 100, San Francisco, CA 94105	Telephone Number (Including Area Code) 415-343-8680
Address of Principal Business Operations (Number and Street, City, State, Zip Code) 333 Market Street, Suite 100, San Francisco, CA 94105	Telephone Number (Including Area Code) 415-343-8680
Brief Description of Business: internet-based travel oriented business	
Type of Business Organization	other (please specify): PROCES
Actual or Estimated date of Incorporation or Organization: Month 1 2 1 2	Year 9 9 Actual Estimated 25 20
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation (CN for Canada: FN for foreign jurisdiction)	THOMSOI

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, NW, Washington, DC 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice and will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDEN	TIFICATION DATA
securities of the issuer; • Each executive officer and director of corporate issuers and	I within the past five years; or direct the vote or disposition of, 10% or more of a class of equity of corporate general and managing partners of partnership issuers; and
• Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial (Owner
Full Name (Last name first, if individual) Peterson, Karl	Managing Partner
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	-
Check Box(es) that Apply: Promoter Beneficial C	Owner 🔀 Executive Officer 🔲 Director 🔲 General and/or Managing Partner
Full Name (Last name first, if individual) Dunn, Timothy	
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	<u>-</u>
Check Box(es) that Apply: Promoter Beneficial C	Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Brockaway, Gregg	
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	
Check Box(es) that Apply: Promoter Beneficial C	Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Mancuso, Matt	
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	
Check Box(es) that Apply: Promoter Beneficial C	Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Durham, Michael	
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	
Check Box(es) that Apply: Promoter Beneficial C	Owner
Full Name (Last name first, if individual) Bonderman, David	
Business or Residence Address (Number and Street, City, State, Zi 333 Market Street, Suite 100, San Francisco, CA	
Check Box(es) that Apply: Promoter Beneficial C	Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Davis, Kelvin L.	
Business or Residence Address (Number and Street, City, State, Zi	<u>. </u>

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Jordan, Jeff Business or Residence Address (Number and Street, City, State, Zip Code) 333 Market Street, Suite 100, San Francisco, CA 94105 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Kendall, Jr., Don Business or Residence Address (Number and Street, City, State, Zip Code) 333 Market Street, Suite 100, San Francisco, CA 94105 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer General and/or □ Director Managing Partner Full Name (Last name first, if individual) Sculley, John Business or Residence Address (Number and Street, City, State, Zip Code) 333 Market Street, Suite 100, San Francisco, CA 94105 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner General and/or Check Box(es) that Apply: ☐ Promoter ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or ☐ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING		
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?	2,000	0,000
3. Does the offering permit joint ownership of a single unit?	Yes	No ⊠
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with the sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		n/a
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)	Pot or a	
Name of Associated Broker or Dealer	-	
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	All States	3
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	All States	3
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		
[MT] [NE] [NV] [NH] [NI] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)		

Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	All States	
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]		-
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]		
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

already sold. Enter "0	ering price of securities included in this offering and the total amount if answer is "none" or "zero". If the transaction is an exchange and indicate in the column below the amounts of the securities and already exchanged.				
Type of Security	•		Aggregate Offering Price		Amount Already Sold
Debt		\$	Officining Trice	\$	rincuay sola
			2 000 000		2 000 000
Equity		\$	2,000,000	. \$	2,000,000
	Common Preferred				
	urities (including warrants)	\$. \$	
Partnership Inte	rests	\$		\$	
Other (Specify	warrants to purchase Class B)	\$	included in above amount	\$	included in above amount
Total		\$	2,000,000	- s	2,000,000
	swer also in Appendix, Column 3, if filing under ULOE		2,000,000	_ ~	2,000,000
in this offering and the Rule 504, indicate the	ccredited and non accredited investors who have purchased securities e aggregate dollar amounts of their purchases. For offerings under number of persons who have purchased securities and the aggregate purchases on the total lines. Enter "0" if answer is "none" or "zero".		Number Investors		Aggregate Dollar Amount of Purchases
Accredited Inve	stors		1	\$	2,000,000
	Investors		0	- \$	0
			1		
	swer also in Appendix, Column 4, if filing under ULOE		<u> </u>	. .	2,000,000
securities sold by the i months prior to the firs Part C-Question 1. Type of offering	ffering under Rule 504 or 505, enter the information requested for all ssuer, to date, in offerings of the types indicated, in the twelve (12) t sale of securities in this offering. Classify securities by type listed in		Type of Security	\$	Dollar Amount Sold
				- _{\$} -	
· ·				- s -	
				- <mark>s</mark> -	
Total					
securities in this offering issuer. The information	of all expenses in connection with the issuance and distribution of the ng. Exclude amounts relating solely to organization expenses of the n may be given as subject to future contingencies. If the amount of an wn, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent	's Fees			\$	
-	graving Costs			\$	
	graving			\$ \$	2,000.00
_			·	\$ \$	2,000.00
-	S			· -	
	es		📙	\$_	
	ions (Specify finder's fees separately)			\$	
Other Expenses	(identify)	• • • • • • • • • • • • • • • • • • • •		\$	
Total				\$	2,000,00

b. Enter the difference between the aggregate offering price given in response to Pa Question 1 and total expenses furnished in response to Part C-Question 4.a. This differ is the "adjusted gross proceeds to the issuet."	гепфе	1,998,000.00			00
5. Indicate below the amount of adjusted gross proceeds to the issuer used or proposed used for each of the purposes shown. If the amount for any purpose is not known, furni estimate and check the box to the left of the estimate. The total of the payments listed equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question above.	sh an must		Payments to Officers,		
			Directors, & Affiliates		Payments to Others
Salarics and fees		S		\$	
Purchase of real estate		5	0	\$	
Purchase, rental or leasing and instaliation of machinery and equipment		\$		\$	
Construction or leasing of plan buildings and facilities		s	Q	\$	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger		\$	٥	s	
Repayment of indebtedness		\$		s	
Working capital		\$	⊠	\$	1,998,000
Other (specify)		\$		\$	
		\$		\$	
Column Totals		\$	Ø	s	1,998,000
Total Payments Listed (columns totals added)	*****		Ø 5 1,998,	000	
D. FEDERAL SIGNATURE	tericologico oksis	************			
The issuer has duly caused this notice to be signed by the undersigned duly authorized following signature constitutes an undertaking by the issuer to furnish to the U.S. Secrequest of its staff, the information furnished by the issuer to any non-accredited investor.	zarities	and	Exchange Commis	sion	, upon written
(ssuer (Print or Type)	į	Date			
Hotwire, Inc.		Aug	gust 20, 2003		
Name of Signer (Printer or Type) Title of Signer (Printer or Type) Lyantha Dunn CFO					
imothy Dunn CFO	***************************************	************	**************************************	*****	Middeletidiodelio-restrologiasquesquesquesque
ATTENTION					

Intentional misstatements or omissions of fact constitute federal criminal violations (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE			
	c), (d), (e) or (f) presently subject to any of the d	-	Yes	No
	See Appendix, Column 5, for state response.			
2. The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in by state law.	n which this notice is fi	iled, a notice	on Form D
3. The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon writter	request, information f	umished by	the issuer to
•	ssuer is familiar with the conditions that must be which this notice is filed and understands that that these conditions have been satisfied.			
The issuer has read this notification and knoundersigned duly authorized person.	ws the contents to be true and has duly caused	I this notice to be sign	ned on its b	ehalf by the
Issuer (print or Type) Hotwire, Inc.	Signature	Date August 20, 200	3	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	•		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

Γ	1	2		3	4					5
	`	Intend t non-acc investors (Part B	redited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of in	under S (if yes explai waiver	llification tate ULOE s, attach nation of granted) E-Item 1)			
					Number		Number			
	State	Yes	No		of Accredited Investors	Amount	of Nonaccredited Investors	Amount	Yes	No
	AL		х							X
	AK		X							x
	AZ		Х							X
	AR		х							х
	CA		X							х
	CO		X							х
	CT		х							х
	DE		Х							х
	DC		Х							х
	FL		х							Х
	GA		x	Series C Preferred Stock & Warrants to Purchase Class B Common Stock	1	\$2,000,000	0			Х
-	HI		X							х
	ID		Х							х
	IL		Х							х
Ī	IA		Х							х
	KS		х							х
	KY		х							X
	LA		x							x
	ME		x							х
	MD		х							X
	MA		х							х
	MI		х							X
	MN	,	х							х
	MS		х							х
	MO		х							х

APPENDIX -

1	2	2	3	4					5
. , .	ŀ		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of in	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	Yes No Number of Accredited Amount Investors Number of Amount Nonaccredited Amount Investors				Yes	No		
MT		х							x
NE		х							x
NV		х						-	x
NH		х				-			x
NJ		х							x
NM		х							х
NY		х							х
NC		х							х
ND		х							x
ОН		х							х
OK		Х							х
OR		х							x
PA		х							х
RI		Х							х
SC		х							x
SD		х							х
TN		Х							х
TX		х							Х
UT		х							х
VT		х							X
VA		х							Х
WA		х							Х
WV		х							X
WI		х						-	Х
WY		х							Х
PR		х							